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FACSIMILE COVER SHEET

Deliver to: Duong, Duc T, USPTO Art Group: 2663
 Facsimile No.: (703) 872-9306 Date: May 2, 2005
 From: William W. Schaal, Reg. No. 39,018
 Our Docket No.: 55123P289 Number of pages 10 including this sheet.
 Application No.: 09/883,554 Filing Date: 6/16/2001
 Docket Due Date(s): 5/10/2005

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: <u>Response</u> (<u>6</u> pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (<u> </u> pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: <u> </u>	<input type="checkbox"/> Petition for: <u> </u>
(<u> </u> pgs) w/cover & abstract)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input type="checkbox"/> Assignment & Cover Sheet (<u> </u> pgs)	<input type="checkbox"/> Reply Brief (<u> </u> pgs)
<input checked="" type="checkbox"/> Certificate of Facsimile <u> </u>	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Declaration & POA (<u> </u> pgs)	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Drawings: <u> </u> sheets, <u> </u> figures	<input type="checkbox"/> Response to Written Opinion (<u> </u> pgs)
<input type="checkbox"/> Extension of Time: <u> </u>	<input type="checkbox"/> Terminal Disclaimer
<input checked="" type="checkbox"/> Fee Transmittal (in duplicate)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input type="checkbox"/> IDS & PTO/SB/08 (<u> </u> pgs)	<input checked="" type="checkbox"/> Transmittal Letter
<input type="checkbox"/> Other <u> </u>	

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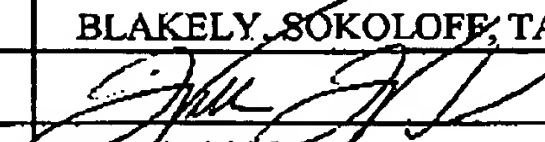
Susan McFarlane 5/2/2005
 Susan McFarlane Date

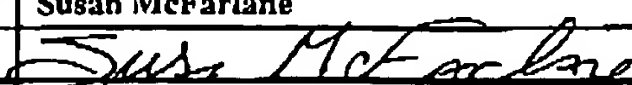
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	09/883,554
		Filing Date	June 16, 2001
		First Named Inventor	Ahmad Chini
		Art Unit	2663
		Examiner Name	Duong, Duc T
Total Number of Pages in This Submission	9	Attorney Docket Number	55123P289

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	May 2, 2005

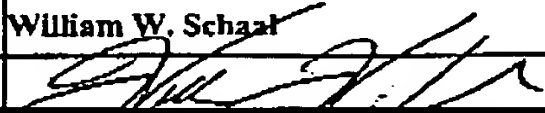
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Typed or printed name	Susan McFarlane		
Signature		Date	May 2, 2005

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 06/04/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete If Known	
		Application Number	09/883,554
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	June 16, 2001
		First Named Inventor	Ahmad Chini
		Examiner Name	Duong, Duc T
		Art Unit	2663
		Attorney Docket No.	55123P289
TOTAL AMOUNT OF PAYMENT (\$)		0.00	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> None <input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION				
1. EXTRA CLAIM FEES				
Total Claims	17	27	0	25.00
Independent Claims	3	4	0	100.00
Multiple Dependent				
SUBTOTAL (1) (\$)				
0.00				
2. ADDITIONAL FEES				
Large Entity Small Entity				
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	380	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$)				
0.00				
Other fee (specify)				
SUBTOTAL (2) (\$)				
0.00				

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	William W. Schaaf	Registration No. (Attorney/Agent)	39,018	Telephone	(714) 557-3800
Signature		Date	05/02/05		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (WTR) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete if Known	
		Application Number	09/883,554
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	June 16, 2001
		First Named Inventor	Ahmad Chini
TOTAL AMOUNT OF PAYMENT (\$)		Examiner Name	Duong, Duc T
		Art Unit	2663
		Attorney Docket No.	55123P289

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

FEE CALCULATION

1. EXTRA CLAIM FEES

	Total Claims	Extra Claims	Fee from below	Fee Paid
	17	27	0	\$0.00
Independent Claims	3	4	0	\$0.00
Multiple Dependent				

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	380	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	160	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1) (\$ 0.00)

**or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,580	2254	790	Extension for reply within fourth month	
1255	2,180	2255	1,090	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1808	180	1808	180	Submission of Information Disclosure Stmt	
1809	700	1809	395	Filing a submission after final rejection (37 CFR § 1.125(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.128(b))	

Other fee (specify)

SUBTOTAL (2)

(3)

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	William W. Schaal	Registration No. (Attorney/Agent)	39,018	Telephone	(714) 557-3800
Signature		Date	05/02/05		

Based on PTO/SB/17 (12/04) as modified by Blakely, Sokoloff, Taylor & Zafman (Mtr) 12/15/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Appl. No. 09/883,554
Amdt. Dated 05/02/2005
Reply to Office Action of February 10, 2005

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MAY 02 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application. No. : 09/883,554
Applicant : Chini, et al.
Filed : 06/16/2001
TC/A.U. : 2663
Examiner : Duc T. Duong

Confirmation No. 1084

Docket No. : 055123.P289
Customer No. : 8791

Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the Office action of February 10, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.